

EXHIBIT 87

**MADISON COUNTY SHERIFF'S OFFICE
NARCOTICS UNIT
CASE FILE COVER SHEET**

CASE # _____

CRIME: _____

DATE & TIME OF OCCURRENCE: _____ AT _____

LOCATION OF OCCURRENCE: _____

ARRESTING OFFICER (S): _____ EID# : _____ / _____ EID# : _____

INVESTIGATING OFFICER (S): _____ EID# : _____ / _____ EID# : _____

SUSPECT (S)

NAME: _____

ADDRESS: _____

D.O.B.: _____ SOCIAL SECURITY #: _____

DISPOSITION: ARRESTED, _____ RACE: BLACK SEX: MALE HOME PHONE: _____

DRUG AMOUNT (if applicable) : _____ VALUE: _____

NAME: _____

ADDRESS: _____

D.O.B.: _____ SOCIAL SECURITY #: _____

DISPOSITION: _____, _____ RACE: _____ SEX: _____ HOME PHONE: _____

DRUG AMOUNT (if applicable) : _____ VALUE: _____

CHECK LIST

OFFENSE REPORT	-	WITNESS STATEMENT	-
RIGHTS SHEET	-	PHOTOGRAPHS	-
ARREST WARRANT	-	ARREST HISTORY	-
AFFIDAVIT	-	SEARCH WARRANT	-
VICTIMS STATEMENT	-	CRIME LAB REPORT	-
SUSPECTS STATEMENT	-	NARRATIVE REPORT	-

EVIDENCE LOCATION: _____